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ABSTRACT

The purpose of this study was to evaluate the many diverse activities going on under the child advocacy label in order to determine if there was anything new or different about this phenomenon and to attempt some conceptual ordering of the field. Interviews were conducted with a number of people knowledgeable in children's service, and an attempt was made to identify as many child advocacy programs as possible. Case studies of some 70 programs were conducted, and a total of 116 child advocacy programs were identified. On the basis of this survey, a number of themes which underlie current efforts in the child advocacy movement are elaborated, and implications for child welfare are presented. (CS)

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CHILD ADVOCACY: IMPLICATIONS FOR CHILD WELFARE

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The concept of advocacy for children is certainly not new. In American social welfare, its tradition can be traced back to the latter part of the nineteenth century when leaders in the child welfare field started to publicize the problem of child abuse and campaigned vigorously for legislation to protect the interests of children. The Children's Bureau, established in 1912 to investigate and make public facts about living conditions of children and their families, has provided over the years a noteworthy example of advocacy within the public sector. The crusade for child labor legislation during the 1920's was a high point in the history of American social reform efforts. More recently, state committees for children and youth have advocated for children on many different fronts. And the Child Welfare League of America has at times been a focal point of advocacy for children within the voluntary sector.

Child advocacy as we are concerned with it today, however, developed largely outside traditional child welfare channels and appeared on the American social scene in the latter part of the 1960's. Like other powerless groups that were organized to redress major social inequities at the end of this decade of social change and reform, the child advocacy movement was clearly influenced by the civil rights revolution and the War on Poverty. It was preceded by several major pronouncements regarding the ways in which the nation was

failing its children.¹ And like all social causes, from the beginning, it drew support from a number of sources. For some, it was simply an attempt to get a piece of the action for children; for others it provided a banner under which they could attract new funding for old ideas; and for still others, it presented an opportunity to design and implement creative solutions to some of the problems of children. For all - consumers, professionals, and citizens alike - the concept of child advocacy embodied a sense of hope and conviction: hope that at last something could be done to improve the lives of the nation's children; and conviction that this was the time for action. For this audience I am sure there is no need to document the many ways in which this country is failing its children, or to explain the feelings of frustration and powerlessness to which the child advocacy movement appealed.

The first call for the establishment of a national system of child advocacy was made in 1969 by the Joint Commission on the Mental Health of Children in a report summarizing the results of a three year study of the behavioral and emotional problems of children.² In order to begin the process of re-ordering national priorities and to address the many inadequacies and inequities in our system of services for children, the Joint Commission recommended the appointment of a Presidential Advisory Council on Children, with powers similar to those of the Council of Economic Advisors. The Joint Commission also proposed the establishment of an elaborate

network of state and local child development councils and authorities with policymaking and operational responsibilities. The participants in the 1970 White House Conference on Children, influenced by this report of the Joint Commission, made similar recommendations for the establishment of a national system of child advocacy.³

These proposals were, of course, made during the early years of the President's first term in office when many still hoped that the momentum for social change of the early 1960's would carry through, and that public monies would be available to fund major programs in the human service sector. Developments since that time make it clear that this was a false hope. In 1971 the President gave the Office of Child Development the explicit charge of establishing the National Center on Child Advocacy; but the Center is operating without a director and has very limited staff and funding. At the same time various agencies within the Department of Health, Education and Welfare allocated approximately 7½ million dollars to child advocacy projects for 1972, and a slightly higher amount for the current year. To evaluate the Administration's commitment to child advocacy, however, one must weigh this funding against its proposal for a 17 billion dollar cut in federally funded social programs, a measure which will severely limit services for children. For the foreseeable future at least, it seems clear that the child advocacy movement as a cause, that is, as an attempt to get a piece of the action for children, is facing hard times; and

it is certainly doomed if its survival depends on high levels of federal funding alone.

However, unlike such developments as mental patients liberation, gay power, and consumer advocacy, the child advocacy movement does build on the long tradition of social action for children mentioned earlier. Unfortunately, the leadership of the children's field which had taken such an important advocacy role for children in the early part of the century, had in recent years been turned over to child welfare specialists who concentrated their energies on more technical matters. For example, since the 1940's, the Children's Bureau has been concerned primarily with administering grants, conducting research and upgrading program standards in very limited areas. Similarly the Child Welfare League, as well as its member agencies, has focused its efforts in recent years on developing high quality professional casework services, primarily for children outside their own homes. For example, in 1967, less than 1% of the children in this country were receiving any form of child welfare service.⁴ Given this preoccupation with residual services, it is little wonder that forces outside the child welfare field took the lead in advancing the child advocacy movement. In a sense it was left to these other groups to worry about the remaining 99% of the children. Therefore if the child advocacy movement can make the child welfare field reassess its traditional advocacy stance and broaden its program focus, it will have served a major function for our field.

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In 1971 the Office of Child Development gave a grant to Columbia University School of Social Work to conduct a national study of child advocacy.⁵ The purpose of this study was to evaluate the many diverse activities going on under the child advocacy label in order to determine if there was anything new or different about this phenomenon and to attempt some conceptual ordering of the field. At the time that we undertook the study, child advocacy was very obviously a bandwagon phenomenon. The only thing which was really clear was that a great deal was going on under this label. The term child advocacy was being used to describe every type of action on behalf of children, including direct service, legal action, coordination and planning, lobbying, etc. For example, 20 some child advocacy projects were funded by such federal agencies as Social and Rehabilitation Services, Office of Child Development, National Institute of Mental Health, Office of Education, and Office of Economic Opportunity. In addition advocacy projects were established at the state level under the auspices of Governor's Committees on Children and Youth, State Departments of Mental Health, and the newly established Offices for Children's Services. In several states legislation was introduced to establish state-wide programs of child advocacy and in North Carolina such a bill was actually passed.⁶

In the voluntary sector as well, many agencies started various types of advocacy programs. The Mental Health associations were perhaps most active in this field, but citizens groups of all types organized in a number of different ways.

For example, groups such as the National Council of Jewish Women and the Junior League have initiated advocacy programs in different cities throughout the country. The child advocacy movement infused new energy into traditional self-help organizations and stimulated the development of such new groups as parents of emotionally disturbed children and foster parents associations. One of the major thrusts was the development of a national Children's Lobby as well as state lobbies in California, Massachusetts and several other states. Also youth groups which had started to organize around student issues in the later 1960's were able to use the child advocacy label to broaden their focus and to demand a more active role in the determination of public policy. And finally, political action groups such as National Welfare Rights Organization were able to use children's issues as a cause around which to organize support for their particular agendas. Perhaps the least active in this whole child advocacy movement were the traditional child welfare agencies. Only the child welfare agencies which have merged with family service agencies and initiated family advocacy programs in accord with the recommendations of the Family Service Association of America have demonstrated any serious interest in advocacy.

The study which we conducted took place in 1971-72. At the start of the study we interviewed people who were knowledgeable in the children's field or identified with the child advocacy movement and we attempted to identify as many child advocacy programs as possible by contacting regional offices

of HEW, State Departments of Mental Health and Public Welfare, State Committees on Children and Youth, etc. We then sent questionnaires to all the programs so identified. Finally we conducted case studies of some 70 programs in different parts of the country. In total, we identified 116 child advocacy programs, and it was this sample on which we based our findings.

To be honest, when we started our study we were dismayed by what we saw and wondered if the whole child advocacy business was anything more than a new sort of hustle for funds. The more we studied the phenomenon, however, the more we began to conclude that there was a certain theme running through much of the child advocacy activity which is distinct and important. It is this aspect of the child advocacy movement which I would like to focus on today.

To understand what is significant about child advocacy, it is necessary to review the history of child welfare services briefly. Under common law tradition children were viewed as the almost exclusive property of their parents and public intervention in the parent-child relationship was considered at best a necessary evil. Therefore, the earliest child welfare services were the orphanages and foster care agencies established to provide for children who were orphans or paupers.

After the Industrial Revolution, as children's labor became less valuable at home, early leaders in the child welfare field began to observe incidents of child abuse and

started their crusade for the establishment of children's protective services. The fact that the need for such programs was not recognized until after the establishment of Societies for the Prevention of Cruelty to Animals may say something about our national priorities! It certainly reveals how deep-seated was the reluctance to allow state intervention in family life.

The early leaders in the child protective field "saw themselves as 'arms of the law' and directed their efforts to the prosecution of parents rather than the provision of social services."⁷ In this way they emphasized the "child-saving" role which was implicit in the orphanages and foster care agencies established earlier. Unfortunately, this child-saving mentality is a legacy which continues to characterize many child welfare programs today. However, on a more positive note, the establishment of children's protective services signaled some general acceptance of the notion that the state has at least limited responsibility to safeguard the interests of children; and it foreshadowed a gradual enhancement of the societal guarantee to children. The 20th century has witnessed a marked expansion in the degree of state intervention in the parent-child relationship as, for example, in judicial decisions requiring that children be given essential medical treatment and that they attend school despite parental wishes.⁸

Yet as Brenner commented in discussing public intrusion into family life:

...the child did not escape control, rather he experienced a partial exchange of masters in which the ignorance, neglect and exploitation of some parents were replaced by presumably fair and uniform treatment at the hands of public authorities and agencies.⁹

This change did not take place without controversy. The President's veto of the Child Development Bill passed by Congress last year only echoed the words of a long line of alarmists who have warned that each new piece of social legislation would communalize our youth and destroy the sanctity of the family. If the social programs developed during this century functioned only to substitute for parental responsibility, there might be some justification for this viewpoint. Certainly many agencies established to serve the interests of children do anything but! In many juvenile institutions, for example, children are subject to neglect and abuse of a sort which would provide grounds for criminal complaint if they received the same treatment from their parents. Similarly, despite laws requiring all children to attend school, school systems have been found to exclude the very children most in need of educational services.¹⁰

Since the 1950's, some of the leaders in the social welfare field, recognizing the futility of many efforts at "child-rescue," have urged a more family-focused approach. The merger of child welfare and family service agencies in some areas is symbolic of this shift in emphasis, as is the mandatory integration of child welfare and ADC services at the state level. Certainly, in recent years the major thrust in child welfare has been toward enhancing parental rights

and responsibilities and strengthening the family unit; yet the failure to achieve any major changes in the quality of services for children remains clear.

Coupled with the recognition of this failure has been a growing conviction on the part of many in the human service field that adequate public services are an essential component of life in a post-industrial society.¹¹ Perhaps the most interesting feature of the child advocacy movement today is that it is focused primarily on the rights, benefits, and entitlements which the state must grant children and their families. Thus, instead of viewing the state as posing a threat to the integrity of family life, child advocacy spokesmen are concerned with the contributions to family life which can be made by social institutions. Recent court decisions requiring adequate treatment for institutionalized children in Alabama¹² and adequate education for all children in Pennsylvania¹³ provide graphic examples of this type of thinking in the legal field. And in the social welfare field, all the emphasis on problems of service delivery - integration and coordination of services, user options, consumer accountability, etc. - reflects a recognition of the significance of service institutions in the lives of citizens.

Despite the President's plea for Americans to look to what they can do for themselves rather than what the country can do for them, it is clear that we have become a welfare state of sorts and that we have all come to depend in greater

or lesser degree on the services provided through the public social sector. Certainly, these services make an essential contribution to healthy child development. Therefore, recognizing the many deficiencies in our social institutions, the differential opportunities for access, and the unequal distribution of resources, the core of child advocacy is the effort, not to dismantle these programs, but rather to monitor and strengthen them so that they can better serve the functions for which they were originally designed.

The three major themes which underline current efforts in the child advocacy field can be identified as follows:

1. Wide-spread recognition of the ecological approach to child development which suggests that children develop not only through interaction with their families but also through transactions with secondary institutions such as schools, hospitals, child care facilities, recreation programs, etc.;
2. Increased acceptance of the concept that in the same way as parents have certain inherent responsibilities to their children, so society has certain obligations to its children and must provide certain essential services to all children;
3. Commitment to the idea that since these services are provided to children, not as a result of charity or governmental largesse, but rather as a matter of right and entitlement, the institutions providing these services must be accountable to the public at large and to their consumers in particular.

In our efforts to define child advocacy we attempted to arrive at a description which would reflect these themes and

capture the essential components of the child advocacy programs we had studied throughout the country. We, therefore, defined child advocacy as an "intervention on behalf of children in relation to those services and institutions impinging on their lives." There are some who would argue that it is unnecessarily limiting to define child advocacy in this way. It would be better to use the term as a banner or a rallying point around which to organize all sorts of activity on behalf of children. We certainly would agree that causes are an important feature of American life - and that at times they are essential to highlight issues, establish new priorities, and revitalize organized efforts to achieve change. For example, the recent ecology movement has made all of us more aware and more concerned about our environment. However, the problem with causes is that they are very ephemeral phenomena; they cannot be directed by professional or governmental bodies, but rather they depend upon charismatic leadership, imagination, mission, and timing. Hopefully we will always have people who can create such causes in the children's field. To leave child advocacy to such chance, however, would be to ignore what we see as the critical ingredient of the child advocacy movement, and that is the newly defined societal need to monitor and enhance the transactions between children and the social institutions which affect their lives. We therefore feel it is important to focus on child advocacy as a function of modern society, as an organized activity which can be planned, implemented, funded, and evaluated.

Child advocacy in this sense is not an easy concept to grasp. It shifts the focus from intra-familial transactions to the transactions between children and secondary social institutions; unlike many earlier attempts to intervene in the parent-child relationship, child advocacy attempts to supplement rather than to supplant parental roles and responsibilities. The key notion in child advocacy is that children have certain rights in relation to the social institutions which impinge on their lives. However, current social circumstances, most especially those of poverty and racism, require that children be given support to insure equal access to the services and benefits to which they are entitled. In addition, given the strength of political forces indifferent to the needs of children, the inherent defects in bureaucratic organization, and the self-serving nature of many professional groups, service organizations must continually be monitored to insure that they serve the purposes for which they were founded.

In practice then, child advocacy activities might include providing evidence at a school suspension hearing as to why an individual child should be re-admitted to school; negotiation with a local group of physicians to provide free medical care to a certain number of children; attempts to mediate between police and a group of teenage boys; organization of a group of parents of emotionally disturbed children to act on their own behalf legal action against a state school which is not providing adequate treatment facilities; public analysis

of the budget of the State Department of Education to highlight the unequal distribution of funds between middle and low income communities; or lobbying against the establishment of income limitations for day care service. From this listing it is obvious that almost every activity on behalf of children including direct service, coordination, program planning, etc. can be an advocacy activity or can lead to advocacy. We would suggest, however, that it is not very useful to engage in a semantic game of relabeling all of these activities as advocacy. Rather, use of the term child advocacy should be confined to those activities which have the distinct purpose of intervening in the transactions between children and secondary institutions impinging on their lives.

There are a number of different possible ways of thinking about and organizing advocacy activities. Today I would simply like to share with you some of the distinctions which we observed in practice. This is a very new field in which a lot of experimentation is going on. Old ways for doing things are being challenged while new ideas are being tested out. It is certainly far too early to draw any final conclusions in this area; and it is not even possible to present any clearcut models for advocacy programs at the present time. For example, social work has long made a distinction between case advocacy, or activity on behalf of an individual client, and class advocacy, or activity on behalf of a group of clients and conventional wisdom has suggested that these

activities must be performed by different people in different organizational settings. Yet the Family Service Association, certainly an old establishment in the social work field, is now advancing the concept of case to cause advocacy in its family advocacy programs. Similarly, distinctions have long been made between legal and lay advocacy; yet many new programs are experimenting with different combinations of legal and lay advocacy. Even the old distinctions between public and voluntary agencies have started to blur as private agencies begin to receive government grants, and public agencies establish citizen advisory boards and make use of lay volunteers.

We found that the most useful ways of distinguishing advocacy programs were in terms of their starting points and their targets for intervention. First, in regard to starting points for advocacy, it seemed that most programs fell into one of four types. Some programs, especially those that have a direct service component, start with case services and engage in advocacy as they see the need arise in their work with individuals. Other programs begin with a survey of needs in a given geographic area or among a given population group. Still other groups start by monitoring the services provided by existing agencies and, as they observe defects in these services, engage in various efforts to effect change. Finally, self-help organizations tend to define issues in terms of the personal experience of their members and use personal documentation as the initiating

force for advocacy.

In regard to the targets for intervention, we found that programs tend to concentrate on one or more levels. Some concentrate almost entirely on achieving certain benefits for the individual case or client. In other words, they do not worry about effecting change which benefits a larger group but rather engage in whatever activity is necessary to safeguard the interests of their particular client or clients. Other groups concentrate on local service agencies and attempt to effect change in the policies, programs, personnel, or board composition of local agencies. Still others concentrate on executive or administrative agencies such as State Departments of Education or Welfare and attempt to effect change at this level in policy guidelines, administrative regulations, budget allocations, etc. Finally, still other groups concentrate on achieving changes in the law either through lobbying for new legislation, or engaging in legal action in the courts.

Generally we found that child advocacy programs tended to cluster in three major types: First are the community-based programs which tend to start either with case services or need surveys and concentrate their efforts on effecting change either at the case level or in local service agencies. Second are the state-wide agencies which usually start either with need surveys or monitoring of existing service systems and concentrate their change efforts on the executive and legislative levels. And finally, national organizations, most

of which are under voluntary auspices, tend to concentrate their efforts either on monitoring the actions of the various federal agencies or on effecting change in the law through lobbying and court action. Self-help organizations tend to be distributed along this entire range, depending upon whether they are local, state-wide, or national groups.

It is almost impossible to say anything definitive about the effectiveness of various types of child advocacy programs at the present time. Generally it would seem that programs which have a limited focus and clearly defined goals are able to design and implement their change strategies most effectively. However, the state of the art in child advocacy is very limited. Among existing agencies greatest attention has been given to the question of structural variable. As a result many advocacy programs have elaborate organizational structures which make provision for representing practically everyone who could possibly have an interest in child advocacy; but these are often irrelevant because goals are so diffuse and strategies and techniques so poorly conceptualized. The need for further innovation, clarification and documentation is clear. It is far too early to do more than point out promising leads and creative ideas.

At present there are a number of major issues in the child advocacy field which require a good deal of hard thinking and exploration. For example, research needed in such areas as the relative advantages of specialized vs. general advocacy programs, the secondary costs of categorical

programs, appropriate operational bases for different types of projects, and optimal allocation of staff roles. One issue which I would like to highlight today is the whole matter of accountability and sanction. In other words, where does the advocate get the right to intervene and to whom is he accountable? In regard to justiciable rights, the sanction is clearcut; in other words, when a client is denied benefits which have been specified by law so that the matter can be adjudicated in the courts, the advocate need have little doubt about his right to intervene. Sanction is also very clearcut in situations in which agencies violate their own policies and procedures. In such cases, because of principle of equal treatment, the advocate has every right to demand that his client be treated in the same way as all other clients of the agency in question. In fact, in situations of the two types just mentioned I would say that the advocate not only has a right, but an obligation to intervene regardless of administrative policy or personal consequence.

It is when the advocate moves into new areas in which rights or benefits have not been legislatively specified or established by administrative precedent that he must examine his motivation and be clear about his sanction. Certainly a child advocate would not wish to refrain from acting simply because certain rights have not been established by law. For example, the right to treatment case in Alabama is a recent example of a case in which lawyers worked to obtain a ruling

which expanded the rights of children by stating that if they were involuntarily committed to a state institution they had a right to adequate treatment. However, it is at this cutting edge of the process of institutionalizing norms and values that the child advocate faces the most difficult questions. At this point he must ask: How does he know what he is fighting for is right? Where does he get the sanction to proceed in a given course of action? On whose behalf is he really acting? Sometimes public values have converged sufficiently to create consensus about a social minimum, so that the advocate may proceed on this basis. Other times, he may use available professional knowledge as a reference point. For instance, if it is known that healthy child development demands certain environmental supports, the advocate in good conscience may proceed on this basis.

Perhaps the most obvious sanction for advocacy activity is the requests or demands of consumers. However, in the children's field this raises additional questions because of the problem of defining who the consumer is. Should the advocate be accountable directly to the child, to the parents, or to some community body? In case advocacy when only the interests of a single client are represented, this is a relatively easy issue to resolve; however, at times the interests of the individual may conflict with those of the group which the advocate represents in other contexts, so he must always be clear about his priorities. By highlighting this problem of accountability I would not want to discourage

anyone from engaging in advocacy. Rights must be constantly redefined and expanded in a changing society, and certainly social workers have a major role to play in this endeavor. I wish only to point out some of the hard questions which must be faced as we move into adversarial positions and can no longer feel secure about acting simply in accordance with agency policy.

So what does all this mean for child welfare practice? First, I would say that child welfare agencies must recognize that they are likely to be the targets of advocacy interventions by those outside the child welfare system - and this must be accepted with as much openness and grace as possible. Rather than waiting for the outside forces to attack, however, child welfare agencies can begin to engage in what the Family Service Association terms "internal advocacy." This means that administration and staff must start to view their own program through the same critical eye that they observe schools, mental health facilities, etc.

One way to do this is to develop various internal monitoring devices. For example, in a small agency it is possible to stop operations for a day occasionally so that the entire staff can meet and engage in a process of self-evaluation in regard to current priorities, progress toward long-range goals, service defects, etc. In a larger agency, single units can engage in a similar process. One approach used effectively in some agencies is to ask the staff in one unit to evaluate the operation of another unit. Other agencies have asked staff

members to take on a client role for short periods in order to experience agency services from the perspective of the consumer. An approach which has been used successfully in a few large institutions is to establish a permanent internal monitoring unit. Generally, the person or persons occupying this position must be able to observe or obtain adequate information about all the operations of the agency and to solicit suggestions and complaints from staff and consumers. He can be accountable to either the administrator or the board of directors but must have free access to them and sufficient status so that his recommendations will be heard.

In regard to this same matter of internal advocacy, child welfare agencies must consider the issue of consumer accountability in relation to their own operations. In recent years, most agencies have at least made a token effort to place consumers on their policymaking or advisory boards. Because of the difficulty in the child welfare field of even identifying, let alone representing, the interests of all consumers it is especially important that board composition be continually re-assessed. For example, several years ago when I was working at a child welfare agency in Boston, the staff, after considerable agitation, were told that some consumers had finally been appointed to the board of directors; initially we took this at face value, realizing only some time later that consumers in this instance referred to middle-class professionals who were adoptive parents. I

trust that things have changed slightly since that time! However, because of this problem of delineating a constituency in the child welfare field, it is important that other types of accountability devices also be explored. For example, it would be possible to develop simple types of evaluation forms which consumers could submit anonymously after they had received service from the agency. Some of the self-organized client groups such as foster parent associations and mothers of abused children could certainly be asked to give direct feedback regarding agency operations. And in some of the large public organizations, it might be possible to develop mechanisms for consumer input to policymaking bodies in different operational units.

Another method of insuring consumer accountability, which I would especially like to advocate, is the establishment of appeal mechanisms through which clients can challenge agency decisions which they feel are arbitrary or unfair. In extreme cases, child welfare consumers are now able to seek recourse in the courts, as, for example, in hearings regarding termination of parental rights and in the recent spate of petitions by foster parents challenging the agency's right to remove children from their homes. But if we had adequate appeal mechanisms, some cases of the latter type might never have to go to court. And certainly such appeal procedures would provide a means for clients to challenge agency decisions which, although perhaps somewhat less dramatic in nature, nevertheless, have significant impact on the lives of the

people involved.

Finally, internal advocacy may at times require what a recent publication by Ralph Nader has termed "whistle-blowing."¹⁴ In other words, if a staff person feels that his agency is engaging in some practice which is contrary to the interests of its consumers and he has exhausted all the internal mechanisms for effecting change, he may have to speak out publicly against the agency. This is not something which a social worker would want to do lightly because of the obvious personal consequences and the possibility that such action might tend to undermine public confidence in other types of social welfare activity. However, there may be times when professional responsibility and an advocacy stance demand such action.

Unfortunately, if we always waited until our own agencies were in order before intervening with other service systems, we might never get to the point of advocacy with other institutions! Therefore, I have dwelt on internal advocacy at some length only because I feel that social workers have a serious responsibility to do everything in their power to make their own agencies accountable to their consumers. However, internal and external advocacy are essentially parallel processes and child welfare workers should be ready to advocate with other service systems at the same time that they are trying to effect change within their own agencies. Certain changes seem to come about most easily through the action of outside forces. For example, it may be that while the child

welfare agency is attempting to advocate with the school, some other group will be able to instigate some necessary change within the child welfare agency. Therefore, the advocate should never hesitate to intervene with other systems because of inadequacies in his own organization.

Because child welfare agencies work with some of the most troubled children in the community and are generally called in to help when the primary service institutions have failed, staff in these agencies are in an especially good position to observe and document the deficiencies in schools, health care programs, welfare departments, etc. Certainly, child welfare workers can and must engage in individual case advocacy to secure necessary services for their clients. Unfortunately, no matter what sort of new laws and progressive administrative rulings we get, it seems that the only way to ensure that they are enforced is to monitor their implementation on a case by case basis. In addition, it is often only in relation to individual problems that one becomes aware of gaps and deficiencies in major social programs and institutions. Therefore, no matter what sort of social progress we make, I think there will always be a need for advocacy at the case level - and certainly this should continue to be an integral component of the caseworker's role. Related to this, I believe, is the worker's responsibility to teach his client as much as possible about his rights in relation to the social institutions impinging on his life. In this way, consumers can learn in

many instances to be their own advocates.

Effective child advocacy often involves class action as well as case advocacy. Because of the particular knowledge and skills required for class advocacy and the political and organizational constraints on direct service agencies, child welfare workers may want to turn to specialized advocacy programs for leadership in this area. However, direct service workers are in an ideal position to raise issues, identify problem areas and potential solutions, and provide case documentation for broad-scale advocacy efforts. If nothing else, they should at least bring problem situations to the attention of appropriate social action groups. Similarly they can provide information, support, and technical assistance to consumer groups which are attempting to organize on their own behalf. And at times, when no other resource is available, a commitment to child welfare may demand that workers mobilize themselves and engage in class advocacy around a specific issue.

Although child advocacy developed somewhat independently of the child welfare field, it is very much an interdisciplinary endeavor which is attracting increasing numbers of child welfare workers. It would seem natural for social workers to take leadership in this field since, unlike other human service professionals, they have long perceived advocacy as an integral component of their professional role. I think there are several major reasons why this has not happened. First, the profession has been negligent in that it has provided little

in the way of training for advocacy in either the professional schools or in-service training programs. Social work education has tended to emphasize a facilitative or collaborative approach to human relationships, concentrating on such matters as group leadership, interviewing techniques, and the components of a casework relationship. Yet advocacy implies an adversarial approach which demands different knowledge and skills. If social workers are to become effective advocates for children - or any other population group - the profession must begin to conceptualize the advocacy process more fully and provide more adequate training for this role.

A second factor which has probably mediated against child welfare workers taking a more active advocacy role is that, despite frequent exhortations and ethical prescriptions, professional organizations have provided little support for individuals who engage in advocacy. The National Association of Social Workers does have an appeal procedure for workers who feel they have been treated unfairly by their employers and it has filed amicus curiae briefs in several court cases involving advocacy on the part of social workers. However, in a recent case in St. Louis, a social worker was fired from a state hospital because, contrary to the wishes of the attending psychiatrist, she arranged legal counsel for an adolescent patient who wished to know her rights with respect to release. On the basis that the presiding judge had excluded expert testimony intended to show that she had engaged in ap-

appropriate social work behavior, the worker appealed a jury decision in favor of the hospital. The appeal was denied in a United States District Court on the basis that social work has no professional standards for advocacy to justify such expert testimony.¹⁵ This is certainly a searing indictment of the profession and suggests that NASW must move immediately to establish practice standards for advocacy. Related to this problem of the lack of professional standards for advocacy is the fact that union collective bargaining agreements and civil service grievance procedures seldom provide any real protection for individuals who engage in advocacy. Certainly, there will always be some personal risk to advocacy; however, if social workers were to insist that their professional associations, unions, and membership organizations support individuals who suffer reprisal for their advocacy activities, I think many workers would be much quicker to adopt an advocacy stance.

A final problem which tends to limit the advocacy engaged in by child welfare workers is the fact that their agencies have provided little in the way of structural support for such activity. This can be seen most simply in such matters as work assignments and performance evaluations. For example, workloads are frequently estimated on the basis of the number of direct client interviews and workers are usually evaluated in terms of their diagnostic ability, interviewing skills, etc. Definitions of workload and criteria for evaluation must be revised if child welfare workers are to perceive advocacy as

part of their defined mission and receive full credit for their activities in this area. Also, it seems obvious that agencies which plan to enhance their advocacy component must provide full support to their workers who attempt to intervene in other social systems and they must develop long-range strategies for class advocacy based on the problems encountered by staff in their work with individuals.

As I mentioned earlier, the state of the art in child advocacy is severely limited, and there are no prescriptions for effectiveness in this area. The whole concept of children's rights is new, as is the notion of intervention in social institutions. A new practice such as this requires much in the way of social invention and experimentation. However, the need for child advocacy is great, and, ideally, child welfare agencies should be well-suited for this function. Therefore, I hope you will agree that the time for action is now.

4/10/73

FOOTNOTES

1. See, for example, Social Security Administration, Report of the Advisory Council on Child Welfare Services (Washington, D.C.: Government Printing Office, Dec., 1959); President's Task Force on Early Child Development, J. McV. Hunt, chairman, "A Bill of Rights for Children" (Washington, D.C.: Office of the Secretary, Department of Health, Education and Welfare, 1967); and Nixon, Richard M., "Statement of the President on the establishment of an Office of Child Development" (April 9, 1969).

2. Crisis in Child Mental Health: Challenge for the 1970's, Report of the Joint Commission on Mental Health of Children (New York: Harper & Row, 1970).

3. White House Conference on Children, Report to the President (Washington, D.C.: Government Printing Office, 1970).

4. Rebecca Smith, "For Every Child...": A Commentary on Developments in Child Welfare 1962-1967," Child Welfare, XLVII:3 (March, 1968), pp. 125-132.

5. For a final report of their study, see Alfred J. Kahn, Sheila B. Kamerman, and Brenda G. McGowan, Child Advocacy: Report of a National Baseline Study (Washington, D.C.: U.S. Department of Health, Education and Welfare, 1973).

6. North Carolina, An Act to Amend Chapter 110 of the General Statutes to Establish the Governor's Advocacy Commission on Children and Youth, Chapter 935, House Bill 203 (July 20, 1971).

7. Robert Mulford, "Protective Services for Children," Encyclopedia of Social Work, Vol. II, 1007.

8. Sanford N. Katz, When Parents Fail: The Law's Response to Family Breakdown (Boston: Beacon Press, 1971), chapter 1.

9. Robert H. Bremner, ed., Children and Youth in America, Vol. II (Cambridge, Mass.: Harvard University Press, 1971), p. 177.

10. See, for example, Juvenile Justice Confounded: Pretensions and Realities of Treatment Services (Paramus, N.J.: National Council on Crime and Delinquency, 1972); Geraldo Rivera, Willowbrook: A Report on How It Is and Why It Doesn't Have to Be That Way (New York: Vintage Books, 1972); and Task Force on Children out of School, The Way We Go to School (Boston: Beacon Press, 1970).

11. For a further discussion of this point, see Alfred J. Kahn, Social Policy and Social Services (New York: Random House, 1973), pp. 14-16.

12. Wyatt v. Stickney, 344 F. Supp. 373 and 344 F. Supp. 387 (M.D. Ala. 1972).

13. Pennsylvania Association for Retarded Children v. Commonwealth of Pennsylvania, 334 F. Supp. 1257 (E.D. Pa. 1971).

14. Ralph Nader, Peter Petkas, and Kate Blackwell, eds., Whistle Blowing (New York: Bantam Books, 1972).

15. Ronda S. Connaway, Carolyn Harnett, Louis Gilden, and David Wineman, "Issues in Professional Advocacy in Mental Health Service Delivery Systems" (paper presented at the Third National Association of Social Workers' National Professional Symposium, New Orleans, La., Nov. 28, 1972).